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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Shawn First name P Middle name Johnson Last name and Suffix (Sr., Jr., II, III)	Melissa First name L Middle name Johnson Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9761	xxx-xx-0920

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Debtor 1 Shawn P Johnson Debtor 2 Melissa L Johnson

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)
5.	Where you live	807 Beaumont Drive Apt. 104	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		DuPage County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. □ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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	otor 1 otor 2	Shawn P Johnson Melissa L Johnso			Docum		Case number	भा (if known)	
Part	t 2:	Tell the Court About	Your Bankr	uptcv Cas	se				
7.	The d	chapter of the cruptcy Code you are	Check one	e. (For a bri	ief description of	each, see <i>Notice Require</i> ge 1 and check the appro		342(b) for Individuals Filing	for Bankruptcy
	choo	sing to file under	■ Chapte	er 7					
			☐ Chapte	er 11					
			☐ Chapte	er 12					
			☐ Chapte	er 13					
8.	How	you will pay the fee	abo orde a pr	ut how you er. If your a e-printed a	i may pay. Typica attorney is submit address.	lly, if you are paying the fing your payment on you	fee yourself, you m r behalf, your attor	erk's office in your local counay pay with cash, cashier's rey may pay with a credit of the track the Application for Infection for Infec	s check, or money card or check with
						Official Form 103A).	option, sign and t	maon the Application for in	arridualo to r dy
			but i app	is not requi lies to your	ired to, waive you r family size and y	r fee, and may do so only ou are unable to pay the	y if your income is fee in installments	are filing for Chapter 7. By I less than 150% of the offices). If you choose this option B) and file it with your petit	cial poverty line that n, you must fill out
9.		you filed for ruptcy within the	■ No.						
		years?	☐ Yes.						
				District		When		Case number	
				District		When		_ Case number	
				District		When		Case number	
10.		nny bankruptcy s pending or being	■ No						
	filed not f you,	by a spouse who is iling this case with or by a business er, or by an	☐ Yes.						
				Debtor				Relationship to you	
				District		When		Case number, if known _	
				Debtor				Relationship to you _	
				District		When		Case number, if known	
11.		ou rent your ence?	□ No.	Go to lin	ne 12.				
	16310		Yes.	-			against you and do	you want to stay in your re	sidence?
				I	No. Go to line 12.				

bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

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	otor 1 otor 2	Shawn P Johnson Melissa L Johnson		Case number (if known)					
Par	t 3:	Report About Any Bu	sinesses	ou Own as a Sole Proprietor					
12.		ou a sole proprietor y full- or part-time less?	□ No.	Go to Part 4.					
			Yes.	Name and location of business					
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one				Independent Sales of Legal Shield Name of business, if any					
				807 Beaumont Drive, Apt. 104 Naperville, IL 60540					
		proprietorship, use a rate sheet and attach		Number, Street, City, State & ZIP Code					
it to this petition.				Check the appropriate box to describe your business:					
				☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))					
				☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))					
				☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))					
				☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))					
				None of the above					
13.	Chap Bank	ou filing under ter 11 of the ruptcy Code and are a small business or?	deadline: operation	filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropria. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement s, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedu C. 1116(1)(B).	of				
	For a	definition of small	No.	I am not filing under Chapter 11.					
		ess debtor, see 11 C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrupto Code.	су				
			☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Co	de.				
Par	t 4:	Report if You Own or	Have Any	Hazardous Property or Any Property That Needs Immediate Attention					
14.		ou own or have any erty that poses or is	■ No.						
	alleg	ed to pose a threat minent and ifiable hazard to	☐ Yes.	What is the hazard?					
	Or do	c health or safety? you own any erty that needs ediate attention?		If immediate attention is needed, why is it needed?					
	perisi livest or a b	xample, do you own nable goods, or ock that must be fed, puilding that needs at repairs?		Where is the property?					
	-			Number, Street, City, State & Zip Code					

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Debtor 1 Shawn P Johnson

Debtor 2 Melissa L Johnson Case number (if known)

Part 5: Explain Your Ef

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-04039 Doc 1 Filed 02/13/17 Entered 02/13/17 11:22:46 Desc Main Document Page 6 of 62

	tor 1 tor 2	Shawn P Johnson Melissa L Johnson		Document			umber (if kno	wn)
Part	t 6:	Answer These Questi	ons for Rep	orting Purposes				
16.		kind of debts do nave?	in	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." □ No. Go to line 16b.				
			16b. A	Yes. Go to line 17. re your debts primarily business oney for a business or investment No. Go to line 16c. Yes. Go to line 17.				
				tate the type of debts you owe that	at are not consum	ner debts or bus	siness debt	S
17.	-	ou filing under oter 7?	□ No. I	am not filing under Chapter 7. Go	to line 18.			
	after prop admi are p be av distr	ou estimate that any exempt erty is excluded and nistrative expenses aid that funds will vailable for ibution to unsecured tors?	al	am filing under Chapter 7. Do you re paid that funds will be available ■ No ■ Yes				excluded and administrative expenses
18.		many Creditors do estimate that you	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,00]	□ 25,001-50,000 □ 50,001-100,000 □ More than100,000
19.	estin	much do you nate your assets to orth?		,	\$1,000,001 - \$10,000,001 \$50,000,001 \$100,000,000	- \$50 million - \$100 million]	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
20.		much do you nate your liabilities ?		,	\$1,000,001 - \$10,000,001 D \$50,000,001 D \$100,000,000	- \$50 million - \$100 million]]	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
Part	t 7:	Sign Below						
For	you		I have exam	nined this petition, and I declare u	ınder penalty of p	erjury that the i	information	provided is true and correct.
				osen to file under Chapter 7, I ames Code. I understand the relief a				Chapter 7, 11,12, or 13 of title 11, to proceed under Chapter 7.
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					torney to help me fill out this		
			·	lief in accordance with the chapte			•	·
			bankruptcy and 3571.	•	60,000, or impriso	nment for up to	20 years, o	or both. 18 U.S.C. §§ 152, 1341, 1519,
			Shawn P Signature of			/s/ Melissa L Melissa L Jo Signature of D	ohnson	1
			Executed or	February 9, 2017 MM / DD / YYYY		Executed on	February MM / DD /	

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Debtor 1	Shawn P Johnson	Document	Page 7 01 62
Debtor 2	Melissa L Johnson		Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Lorraine M. Greenberg	Date	February 9, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
Lorraine M. Greenberg		
Printed name		
Lorraine M. Greenberg		
Firm name		
150 N. Michigan Avenue		
Suite 800		
Chicago, IL 60601		
Number, Street, City, State & ZIP Code		
Contact phone 312-588-3330	Email address	lgreenberg@greenberglaw.net
3129023		
Bar number & State		

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		Docum	ent Page 8 of 62	7	•
Fill in this inform	mation to identify your	case:			
Debtor 1	Shawn P Johnso	n			
	First Name	Middle Name	Last Name		
Debtor 2	Melissa L Johnso	on			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					Charle if this is an
(II KIOWII)					Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

you	original forms, you must fill out a new Summary and check the box at the top of this page.		•
Par	1: Summarize Your Assets		
		Your a	essets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	10,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	43,568.96
	1c. Copy line 63, Total of all property on Schedule A/B	\$	53,568.96
Par	2: Summarize Your Liabilities		
			iabilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	49,658.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	68,871.21
	Your total liabilities	\$	118,529.21
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,922.12
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,517.59
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Case number (if known)

Debtor 1 Shawn P Johnson Document Page 9 of 62

 From the Statement of Your Current Monthly Income: Copy your total current monthly income fr 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 	rom Official Form \$ 6,150.48
--	-------------------------------

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tot	tal claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debtor 2

Melissa L Johnson

	Ca	se 17-04039	Doc 1	Filed 02/13/17	7 Entered 02/13/1 ⁻ Page 10 of 62	7 11:22:46	Desc	Mairi
-	in this inform	nation to identify yo	ur case and t					
Deb	otor 1	Shawn P Johns	son					
		First Name	Mido	lle Name	Last Name			
	otor 2 ouse, if filing)	Melissa L John		lle Name	Last Name			
Unii	ted States Bar	nkruptcy Court for the	: NORTHE	RN DISTRICT OF ILL	INOIS			
Cas	se number							Check if this is an amended filing
n ea	chedule ch category, se cit fits best. Be	e as complete and acc e space is needed, atta	ribe items. Lis urate as possil	ble. If two married peop	f an asset fits in more than one ole are filing together, both are eather top of any additional pages,	equally responsible	le for supply	ying correct
Part	1: Describe E	Each Residence, Build	ing, Land, or C	ther Real Estate You C	Own or Have an Interest In			
	No. Go to Part Yes. Where is							
1.1	timaahara			What is the proper	rty? Check all that apply			
	Street address, if	f available, or other descript	**	Single-family				
		,	lion		y home ulti-unit building m or cooperative	the amount of any	secured cla	or exemptions. Put aims on <i>Schedule D:</i> Secured by Property.
	City		ZIP Code	Condominiur Manufacture Land	ulti-unit building m or cooperative ed or mobile home	the amount of any Creditors Who Ha	y secured cla ave Claims S the C	aims on Schedule D: Secured by Property. urrent value of the ortion you own?
	City	State		Condominium Manufacture Land Investment p Timeshare Other	ulti-unit building m or cooperative ed or mobile home property est in the property? Check one	current value of entire property? \$10,00 Describe the nate	the Control of the Co	aims on Schedule D: Secured by Property. urrent value of the

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$10,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Document Page 11 of 62 Shawn P Johnson Debtor 1 Debtor 2 Melissa L Johnson Case number (if known) 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Chevrolet 3 1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Equinox** Debtor 1 only Model: Creditors Who Have Claims Secured by Property. 2013 Year: Debtor 2 only Current value of the Current value of the 48000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$17.000.00 \$17,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$17,000.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... household goods and furnishings, holiday decorations; linens, housewares, small appliances, pots, pans, dishes; living room set; bedroom set, lamps, grill, household tools, tool box, books, tv \$2,000.00 stand, dining set; tables, chairs, 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... tv; tv, dvd player, cell phones, radio, computer, laptop, game \$1.800.00 console. 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No

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for Part 4: De Do you ov	ples: Money you l	egal or equitable interest in any of the following? have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Cash	Current value of the portion you own? Do not deduct secured claims or exemptions.
for Part 4: De Do you ov 16. Cash Examp	wn or have any lo	egal or equitable interest in any of the following? have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	portion you own? Do not deduct secured claims or exemptions.
Part 4: De Do you ov	wn or have any l	egal or equitable interest in any of the following?	portion you own? Do not deduct secured claims or exemptions.
for Part 4: De			<pre>portion you own? Do not deduct secured</pre>
for Part 4: De			
for Part 4: De			
15. Add 1		of all of your entries from Part 3, including any entries for pages you have attached number here	\$7,700.00
■ No □ Yes.	Give specific info	ormation	
_ `	ther personal an	d household items you did not already list, including any health aids you did not list	
		household pets	
		household note	\$0.0
Exam _l □ No □	arm animals ples: Dogs, cats,	pirds, horses	
		wedding bands, engagement ring, costume jewelry	
■ Yes.	Describe	wadding hands angagement ring costume lowelry	\$3,000.0
☐ No	ples: Everyday je	velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, go	ld, silver
		necessary wearing apparel, bible, texbooks, family pictures	\$700.0
■ Yes.	Describe		
		othes, furs, leather coats, designer wear, shoes, accessories	
⊔ Yes. 11. Clothe	Describe		
Exam _l ■ No	ples: Pistols, rifles	s, shotguns, ammunition, and related equipment	
10. Firearr	ms		
		camera	\$100.0
		golf clubs,	\$100.0
	Describe		
■ Yes.	Describe		

☐ No

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Debtor 1 Debtor 2	Shawn P Johnson Melissa L Johnson	_	Case number (if known)	
■ Yes	i		Institution name:	
	17.1.	Checking	Naperville Bank & Trust	\$37.57
	17.2.	Checking	First Midwest Bank	\$194.32
	17.3.	Savings	Xceed Financial Credit Union	\$0.00
	17.4.	Checking	Xceed Federal Credit Union	\$0.00
	17.5.	Savings	Xceed Federal Credit Union	\$0.00
Exan ■ No	,	ent accounts with br	okerage firms, money market accounts	
19. Non- r joint ■ No	venture Give specific information		orated and unincorporated businesses, including an interest in an LLC, pa	rtnership, and
Nego Non- ■ No	tiable instruments include p	personal checks, cas those you cannot tra	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
<i>Exan</i> □ No	ement or pension account apples: Interests in IRA, ERIS	SA, Keogh, 401(k), 4	403(b), thrift savings accounts, or other pension or profit-sharing plans Institution name:	
	401(I		Bluestar Retirement Services	\$8,020.00
Your <i>Exan</i> ■ No		s you have made so	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual:	
23. Annu ■ No		. ,	ey to you, either for life or for a number of years)	
		e and description.		
26 U.S ■ No	S.C. §§ 530(b)(1), 529A(b),	and 529(b)(1).	pualified ABLE program, or under a qualified state tuition program.	
⊔ Yes	Institution i	iame and descriptio	n. Separately file the records of any interests.11 U.S.C. § 521(c):	

Official Form 106A/B Schedule A/B: Property

Entered 02/13/17 11:22:46 Case 17-04039 Doc 1 Filed 02/13/17 Desc Main Page 14 of 62 Document Shawn P Johnson Debtor 1 Melissa L Johnson Debtor 2 Case number (if known) 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... estimated 2016 US & IL tax refunds \$6,500.00 State & Federal 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: term life insurance policy Melissa Johnson, \$0.00 spouse Whole Life State Farm Life Insurance Melissa Johnson, \$2,342.96 Policy spouse Whole Life Insurance Policy - State Shawn Johnson, \$1.690.76 Farm spouse

Official Form 106A/B Schedule A/B: Property page 5

Melissa Johnson,

spouse

Universal Life Insurance Policy - State

Farm Insurance

\$0.00

	Case 17-04039	Doc 1	Filed 02/13/17 Document	Entered 02/13/17 11:22: Page 15 of 62	46 Desc Main
Debtor 1 Debtor 2	Shawn P Johnson Melissa L Johnson			Case number (if k	nown)
		versal Life m Ins. Co.	Insurance Policy - S	tate Shawn Johnson, spouse	\$83.3
If you a someo	terest in property that is of are the beneficiary of a living one has died. Give specific information			ed surance policy, or are currently entitled	to receive property because
Examp ■ No —	s against third parties, wholes: Accidents, employmer Describe each claim	nt disputes, ir		it or made a demand for payment to sue	
■ No	contingent and unliquidat		f every nature, includin	g counterclaims of the debtor and rig	yhts to set off claims
■ No	nancial assets you did not Give specific information	t already list			
				ny entries for pages you have attache	ed \$18,868.96
Part 5: De	scribe Any Business-Related	l Property You	Own or Have an Interest	n. List any real estate in Part 1.	
No. Go	own or have any legal or equ o to Part 6. Go to line 38.	itable interest	in any business-related p	roperty?	
	scribe Any Farm- and Comm			n or Have an Interest In.	
■ No.	Jown or have any legal of Go to Part 7. Go to line 47.	r equitable ii	nterest in any farm- or o	commercial fishing-related property?	

Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

■ No

 $\hfill \square$ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Official Form 106A/B Schedule A/B: Property page 6

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Debtor 1 Shawn P Johnson
Debtor 2 Melissa L Johnson Case number (if known)

Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$10,000.00
56.	Part 2: Total vehicles, line 5		\$17,000.00		_
57.	Part 3: Total personal and household items, line 15		\$7,700.00		
58.	Part 4: Total financial assets, line 36		\$18,868.96		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	-	\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$43,568.96	Copy personal property total	\$43,568.96
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$53,568.96

Official Form 106A/B Schedule A/B: Property page 7

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		I A A A A A A A A A A A A A A A A A A A	111 1 7000 17 01 07	
Fill in this infor	mation to identify your	case:		
Debtor 1	Shawn P Johnso	n		
	First Name	Middle Name	Last Name	
Debtor 2	Melissa L Johnso	on		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check i
				amende

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exemp
--

١.	willen set of exemptions are you claiming	: Crieck one only, ever	ii ii yo	iui spouse is illing with you.						
	■ You are claiming state and federal nonbar	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)						
	☐ You are claiming federal exemptions. 11	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption					
	2013 Chevrolet Equinox 48000 miles Line from Schedule A/B: 3.1	\$17,000.00 \$2,400.00		735 ILCS 5/12-1001(c)						
	Line from Scriedule AVB. 3.1			100% of fair market value, up to any applicable statutory limit						
	necessary wearing apparel, bible, texbooks, family pictures	\$700.00		\$700.00	735 ILCS 5/12-1001(a)					
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit						
	wedding bands, engagement ring, costume jewelry	\$3,000.00		\$3,000.00	735 ILCS 5/12-1001(b)					
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit						
	Checking: Naperville Bank & Trust Line from Schedule A/B: 17.1	\$37.57		\$37.57	735 ILCS 5/12-1001(b)					
	Zino nom osmodalo 702. TTT			100% of fair market value, up to any applicable statutory limit						
	Checking: First Midwest Bank Line from Schedule A/B: 17.2	\$194.32		\$194.32	735 ILCS 5/12-1001(b)					
	Line nom concedio FVD. 1112			100% of fair market value, up to any applicable statutory limit						

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Melissa L Johnson Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 401(k): Bluestar Retirement Services 735 ILCS 5/12-1006 \$8,020.00 100% Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit State & Federal: estimated 2016 US & 735 ILCS 5/12-1001(b) \$6,500.00 \$4,768.11 IL tax refunds Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit Whole Life State Farm Life Insurance 215 ILCS 5/238 100% \$2,342.96 **Policy** Beneficiary: Melissa Johnson, П 100% of fair market value, up to spouse any applicable statutory limit Line from Schedule A/B: 31.2 Whole Life State Farm Life Insurance 735 ILCS 5/12-1001(f) 100% \$2,342.96 **Policy** Beneficiary: Melissa Johnson, 100% of fair market value, up to any applicable statutory limit spouse Line from Schedule A/B: 31.2 Whole Life Insurance Policy - State 215 ILCS 5/238 100% \$1,690.76 Farm Beneficiary: Shawn Johnson, 100% of fair market value, up to any applicable statutory limit spouse Line from Schedule A/B: 31.3 Whole Life Insurance Policy - State 735 ILCS 5/12-1001(f) 100% \$1,690.76 Beneficiary: Shawn Johnson, 100% of fair market value, up to spouse any applicable statutory limit Line from Schedule A/B: 31.3 **Universal Life Insurance Policy -**215 ILCS 5/238 100% \$0.00 State Farm Insurance Beneficiary: Melissa Johnson, 100% of fair market value, up to spouse any applicable statutory limit Line from Schedule A/B: 31.4 **Universal Life Insurance Policy -**215 ILCS 5/238 100% \$83.35 State Farm Ins. Co. Beneficiary: Shawn Johnson, spouse 100% of fair market value, up to Line from Schedule A/B: 31.5 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Nο Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Shawn P Johnson

Debtor 1

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		Document Pa	<u>age 19 d</u>	of 62		
Fill in this information	tion to identify you	ur case:				
Debtor 1	Shawn P Johns	son				
Debior 1	First Name		t Name			
Debtor 2	Melissa L John	son				
(Spouse if, filing)	First Name		t Name			
United Otates Deals		. NORTHERN DISTRICT OF HILLING	ıc.			
United States Bankı	ruptcy Court for the	: NORTHERN DISTRICT OF ILLINOI	3			
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Official Form	<u>106D</u>					
Schedule D	: Creditors	s Who Have Claims See	cured	by Propert	V	12/15
	- Or our core	, title riave diamie de		<i>by</i> 1.0po.t)	
		If two married people are filing together, bo				
s needed, copy the A number (if known).	dditional Page, fill it	out, number the entries, and attach it to this	s form. On t	ne top of any addition	nai pages, write your nai	ne and case
1. Do any creditors ha	ve claims secured b	v vour property?				
		this form to the court with your other sche	dulae Vou	have nothing else t	a report on this form	
_		•	edules. Tou	nave nothing else t	o report on this form.	
Yes. Fill in al	II of the information	below.				
Part 1: List All S	Secured Claims					
2 List all secured cla	ims If a creditor has	more than one secured claim, list the creditor s	senarately	Column A	Column B	Column C
		s a particular claim, list the other creditors in Pa		Amount of claim	Value of collateral	Unsecured
much as possible, list	the claims in alphabet	ical order according to the creditor's name.		Do not deduct the	that supports this	portion
2.1 Pnc Bank		Describe the property that secures the cla	aim:	value of collateral. \$15,395.00	claim \$17,000.00	If any \$0.00
Creditor's Name		2013 Chevrolet Equinox 48000 n		Ψ10,000.00	Ψ11,000.00	Ψ0.00
		2013 Chevrolet Equiliox 40000 II	111103			
Attn: Bankr	untcv					
249 5th Ave		As of the date you file, the claim is: Check apply.	all that			
Pittsburgh,	PA 15222	□ Contingent				
Number, Street, Ci	ty, State & Zip Code	☐ Unliquidated				
, , ,	,, ,	☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mortg	age or secur	ed		
■ Debtor 2 only		car loan)	ago or occar.	- C		
Debtor 1 and Debtor	ar O anh	Catalystamy lies (ayah as tay lies, mashania	ala lian)			
_		☐ Statutory lien (such as tax lien, mechanic	c's lien)			
☐ At least one of the☐ Check if this claim		Judgment lien from a lawsuit				
community debt	n relates to a	Other (including a right to offset)				
	Opened					
	07/14 Last					
But 114 and a	Active	Look A. Politon of an analysis and an artist	3851			
Date debt was incurr	ed 1/13/17	Last 4 digits of account number	3031			
	by Wyndham	Describe the property that secures the cl	aim:	\$34,263.00	\$10,000.00	\$24,263.00
Creditor's Name		timeshare				
407E0 W Ch	aulaatan Dhad	As of the date you file, the claim is: Check	all that			
	arleston Blvd	apply.				
Las Vegas,		Contingent				
Number, Street, Ci	ty, State & Zip Code	Unliquidated				
Who owes the debt	2 Charle and	Disputed				
_	: Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortga	age or secur	ed		
Debtor 2 only		car loan)				
Debtor 1 and Debto	•	Statutory lien (such as tax lien, mechanic	c's lien)			
At least one of the	debtors and another	☐ Judgment lien from a lawsuit				

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			Boodinone	. ago 20 oi	02	
Debtor '	Shawn P	lohnson		Cas	e number (if know)	
	First Name	Middle Nam	e Last Name	_		
Debtor 2	2 Melissa L	Johnson				
	First Name	Middle Nam	e Last Name			
	k if this claim re munity debt	lates to a	Other (including a right to offset)	Purchase Mon	ey Security	
		Opened 11/07/12				
Date dek	ot was incurred	Last Active 3/10/15	Last 4 digits of account nun	0926		
Add th	e dollar value of	vour entries in Col	umn A on this page. Write that nur	mhar hara	\$49,658.00	
If this i	is the last page o	of your form, add th	e dollar value totals from all pages		\$49,658.00	
Write t	hat number here	: :			\$49,030.00	
Part 2:	List Others to	o Be Notified for	a Debt That You Already Liste	d		
trying to than one	collect from you creditor for any	u for a debt you ow	e to someone else, list the creditor ou listed in Part 1, list the addition	in Part 1, and then I	ady listed in Part 1. For example, if a collection agenc ist the collection agency here. Similarly, if you have n ou do not have additional persons to be notified for a	nore
P P	innacle Reco	18	o Code		e in Part 1 did you enter the creditor? _2.2_ of account number _1076_	
С	arlsbad, CA	92013				
P 2	ame, Number, St nc Bank 730 Liberty <i>F</i> ittsburgh, P <i>F</i>		o Code		e in Part 1 did you enter the creditor? of account number	
	ame, Number, St	reet, City, State & Zip	o Code	On which lin	e in Part 1 did you enter the creditor? 2.2	
A P	,	nkruptcy Depar '4	tment	Last 4 digits	of account number 0926	
V	yndham Re	reet, City, State & Zip sort Developme		On which lin	e in Part 1 did you enter the creditor?	
_	O Box 93843 as Vegas, N	8 / 89193-3843		Last 4 digits	of account number	

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	Case 17 04000 Doo 1	Document Page 2	1 of 62	30 Main
Fill in this	information to identify your case:			
Debtor 1	Shawn P Johnson			
		iddle Name Last Name		
Debtor 2	Melissa L Johnson			
(Spouse if, filing	ng) First Name M	iddle Name Last Name		
United Sta	ites Bankruptcy Court for the: NORT	HERN DISTRICT OF ILLINOIS		
Case num	ber			
(if known)				Check if this is an
				amended filing
Schedu	Form 106E/F ule E/F: Creditors Who H			12/15
any executo Schedule G Schedule D: left. Attach t	lete and accurate as possible. Use Part 1 for contracts or unexpired leases that coul : Executory Contracts and Unexpired Leas : Creditors Who Have Claims Secured by Fithe Continuation Page to this page. If you ase number (if known).	d result in a claim. Also list executory of the control of the con	contracts on Schedule A/B: Property (Offi any creditors with partially secured clain the Part you need, fill it out, number the e	cial Form 106A/B) and on ns that are listed in entries in the boxes on the
	List All of Your PRIORITY Unsecured			
	creditors have priority unsecured claims	against you?		
_	Go to Part 2.			
☐ Yes	List All of Your NONPRIORITY Unsec			
Yes 4. List all unsecuthan on	You have nothing to report in this part. Subm of your nonpriority unsecured claims in the red claim, list the creditor separately for each the creditor holds a particular claim, list the oth	ne alphabetical order of the creditor who claim. For each claim listed, identify what	b holds each claim. If a creditor has more the type of claim it is. Do not list claims already it	ncluded in Part 1. If more
Part 2.				Total claim
4.1	onital One	Lock 4 digito of poorumt number	6627	
	apital One onpriority Creditor's Name	Last 4 digits of account number	6637	\$2,292.00
At	ttn: Bankruptcy o Box 30285	When was the debt incurred?	Opened 10/11 Last Active 11/07/15	
	alt Lake City, UT 84130	mon was the dest mountain.	11/01/13	_
	ımber Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
WI	ho incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
de Is :	bt the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes			
	162	Other. Specify Credit Card	4	

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Debt	or 2 Melissa L Johnson	Case number (if know)		
4.2	Capital One	Last 4 digits of account number 9256		\$1,705.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 01/10 Last Active 11/07/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	O continuent		
	■ Debtor 2 only	☐ Contingent		
		☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another	Student loans	u ciaini.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	ag plane, and other similar debts	
	■ No □ Yes			
	☐ Yes	Other. Specify Credit Card	1	
4.3	Citicards Cbna Nonpriority Creditor's Name	Last 4 digits of account number	4935	\$6,271.00
	Citicorp Credit Svc/Centralized Bankrupt Po Box 790040	When was the debt incurred?	Opened 07/12 Last Active 11/09/15	
	Saint Louis, MO 63179 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another	Student loans	a diami.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other Specify Credit Card	<u>1</u>	
4.4	Citicards Cbna	Last 4 digits of account number	2327	\$861.00
	Nonpriority Creditor's Name Citicorp Credit Svc/Centralized Bankrupt Po Box 790040	When was the debt incurred?	Opened 05/07 Last Active 11/09/15	
	Saint Louis, MO 63179 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharir		
	Yes	Other. Specify Credit Card	<u> </u>	

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Melissa L Johnson	Case number (if know)			
ComCast Cable	Last 4 digits of account number 7920	\$96.31		
Nonpriority Creditor's Name PO Box 3002	When was the debt incurred?			
Number Street City State Zlp Code	As of the date you file the plain is: Check all that apply			
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
Debtor 1 only	Continued.			
	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans			
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims			
■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
Yes	Other. Specify			
Comenity Bank, Bankruptcy Dept	Last 4 digits of account number 8284	\$3,983.70		
Nonpriority Creditor's Name PO Box 182125	When was the debt incurred?			
Columbus, OH 43218-2125	When was the debt incurred:			
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	□ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
No	☐ Debts to pension or profit-sharing plans, and other similar debts			
■ No □ Yes				
La res	Other. Specify			
Comenity Bank, Bankruptcy Dept Nonpriority Creditor's Name	Last 4 digits of account number 0143	\$1,103.60		
PO Box 183043 Columbus, OH 43218-3043	When was the debt incurred?			
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.	- 117			
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
No	☐ Debts to pension or profit-sharing plans, and other similar debts			
□Yes	Other. Specify			
00	Other. Specify			

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Debt	or 2 Melissa L Johnson		Case number (if know)	
4.8	Commerce Bank	Last 4 digits of account number	9621	\$4,553.31
	Nonpriority Creditor's Name Attn: KC Rec -10 Po Box 419248 Kansas City, MO 64141	When was the debt incurred?	Opened 12/12 Last Active 5/12/15	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.9	Credit Management, LP	Last 4 digits of account number	2126	\$133.00
	Nonpriority Creditor's Name Credit Management, LP Po Box 118288	When was the debt incurred?	Opened 09/14	
	Carrolton, TX 75011 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Collection Phone - 1	Attorney Wow Internet Cable	
4.1 0	Discover Financial	Last 4 digits of account number	0885	\$1,444.00
	Nonpriority Creditor's Name		Opened 12/12 Last Active	
	Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 12/12 Last Active 3/08/16	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	

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	1 Shawn P Johnson 2 Melissa L Johnson	Case number (if know)	
4.1 1	Edna Kirby	Last 4 digits of account number	\$3,600.00
	Nonpriority Creditor's Name c/o Gregory & Kacie Johnson 1705 Lily Street Aurora, IL 60505	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Edward Hospital	Last 4 digits of account number 7939	\$869.81
	Nonpriority Creditor's Name 801 S. Washington Street Attn: Patient Financial Accounts Naperville, IL 60540	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Edward Hospital	Last 4 digits of account number 7938	\$117.53
	Nonpriority Creditor's Name 801 S. Washington Street Attn: Patient Financial Accounts	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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Melissa L Johnson		Case number (if know)	
Elan Financial Service	Last 4 digits of account number	5467	\$8,354.00
Nonpriority Creditor's Name dba Edward Jones Mastercard Po Box 790084 Saint Louis, MO 63179	When was the debt incurred?	Opened 05/04 Last Active 8/10/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Lending Club Corp	Last 4 digits of account number	6581	\$17,800.00
Nonpriority Creditor's Name	_	One and 00/42 Least Asting	
71 Stevenson St Suite 300	When was the debt incurred?	Opened 09/13 Last Active 7/25/16	
San Francisco, CA 94105	When was the dest mounted.	1723/10	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	autoria di anticio di alla con alla con alla con	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Unsecured		
Merchants Credit	Last 4 digits of account number	0986	\$244.00
Nonpriority Creditor's Name	_		
223 W Jackson Blvd Ste 700	When was the debt incurred?	Opened 09/15	
Chicago, IL 60606			
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other Specify Collection	Attorney Edward Hospital	

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Melissa L Johnson	Case number (if know)		
Merchants Credit	Last 4 digits of account number 4420	\$150.00	
Nonpriority Creditor's Name	Last 4 digits of account number	ψ130.00	
223 W Jackson Blvd	When was the debt incurred?		
Ste 700			
Chicago, IL 60606 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	lacksquare Debts to pension or profit-sharing plans, and other similar debts		
Yes	■ Other. Specify The Wright Center For Women		
Paypal Credit	Last 4 digits of account number 1454	\$2,798.24	
Nonpriority Creditor's Name		,	
PO Box 105658	When was the debt incurred?		
Atlanta, GA 30348-5658 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	To or the date year may also status of oriotic an article party		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
ls the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify		
Portfolio Recovery	Last 4 digits of account number 0941	\$5,512.00	
Nonpriority Creditor's Name			
Po Box 41067	When was the debt incurred? Opened 02/16		
Norfolk, VA 23541 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
Yes	Factoring Company Account Synchrony Other. Specify Bank		

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Debtor 2 Melissa L Johnson Case number (if know) 4.2 3714 \$4,241.71 WorldMark by Wyndham Last 4 digits of account number 0 Nonpriority Creditor's Name **Attention: Bankruptcy Department** When was the debt incurred? P.O. Box 97474 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 **Xceed Financial Fcu** 8574 \$2,741.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/13 Last Active 888 Nash St 7/14/16 When was the debt incurred? El Segundo, CA 90245 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Advanced Call Center Technologies** Line 4.19 of (Check one): Part 1: Creditors with Priority Unsecured Claims PO Box 9091 ■ Part 2: Creditors with Nonpriority Unsecured Claims Gray, TN 37615-9091 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Alliance One** Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 4850 Street Rd Ste 300 Part 2: Creditors with Nonpriority Unsecured Claims Trevose, PA 19053 Last 4 digits of account number 6550 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Alltran Financial, LP Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 722910 ■ Part 2: Creditors with Nonpriority Unsecured Claims Houston, TX 77272-2910 Last 4 digits of account number 8952 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

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Debtor 1 Shawn P Johnson Debtor 2 Melissa L Johnson		Case number (if know)	
Bill Me Later PO Box 2394	Line 4.18 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Omaha, NE 68103-2394	Last 4 digits of account number	- Part 2. Creditors with Noriphority Orisecured Claims	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Blitt & Gaines, P.C	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
661 Glenn Avenue Wheeling, IL 60090		Part 2: Creditors with Nonpriority Unsecured Claims	
Wilcomig, in 00000	Last 4 digits of account number	2881	
Name and Address	On which entry in Part 1 or Part 2	· · · · · · · · · · · · · · · · · · ·	
Capital One 15000 Capital One Dr	Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Richmond, VA 23238		Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2		
Capital One 15000 Capital One Dr	Line 4.2 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Richmond, VA 23238		■ Part 2: Creditors with Nonpriority Unsecured Claims	
·	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2		
Cardmember Service PO Box 108	Line 4.14 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Saint Louis, MO 63166-0108		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2		
Citicards Cbna Po Box 6241	Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Sioux Falls, SD 57117		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2		
Citicards Cbna Po Box 6241	Line 4.4 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Sioux Falls, SD 57117		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	· ·	
Client Services, Inc 3451 Harry S. Truman Blvd.	Line 4.18 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Saint Charles, MO 63301-4047		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	9261	
Name and Address	On which entry in Part 1 or Part 2	·	
Comenity Bank, Bankruptcy Dept PO Box 182125	Line 4.18 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Columbus, OH 43218-2125		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	1454	
Name and Address	On which entry in Part 1 or Part 2	· ·	
Commerce Bank 1045 Executive Parkway D	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Saint Louis, MO 63141		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	·	
Credit Management, LP 4200 International Pkwy	Line 4.9 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Carrollton, TX 75007		■ Part 2: Creditors with Nonpriority Unsecured Claims	
·	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	· · · · · · · · · · · · · · · · · · ·	
Discover Financial Po Box 15316	Line 4.10 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
I O DON TOUTO		Part 2: Creditors with Nonpriority Unsecured Claims	

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Debtor 1 Shawn P Johnson	Document Pa	ge 30 01 02
Debtor 2 Melissa L Johnson		Case number (if know)
Wilmington, DE 19850	Last 4 digits of account number	
Name and Address Edward-Elmhurst Health Edward Hospital PO Box 4207	On which entry in Part 1 or Part 2 Line 4.12 of (<i>Check one</i>):	did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Carol Stream, IL 60197-4207	Last 4 digits of account number	
Name and Address FMA Alliance, Ltd.	On which entry in Part 1 or Part 2 Line 4.15 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
12339 Cutten Road Houston, TX 77066	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims 4353
Name and Address GC Services Limited Partnership	On which entry in Part 1 or Part 2 Line 4.4 of (<i>Check one</i>):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims
Collection Agency Division 6330 Gulfton		Part 2: Creditors with Nonpriority Unsecured Claims
Houston, TX 77081	Last 4 digits of account number	0336
Name and Address Glass Mountain Capital LLC 1930 Thoreau Drive, Ste 100	On which entry in Part 1 or Part 2 Line 4.18 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Schaumburg, IL 60173	Last 4 digits of account number	8368
Name and Address Lending Club Corp 71 Stevenson St Ste 300 San Francisco, CA 94105	On which entry in Part 1 or Part 2 Line 4.15 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Merchants Credit 223 W Jackson Blvd Ste 4 Chicago, IL 60606	On which entry in Part 1 or Part 2 Line 4.16 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Merchants Credit 223 W Jackson Blvd Ste 4 Chicago, IL 60606	On which entry in Part 1 or Part 2 Line 4.17 of (<i>Check one</i>):	did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Monarch Recovery Management 10965 Decatur Road Philadelphia, PA 19154-3210	On which entry in Part 1 or Part 2 Line 4.3 of (<i>Check one</i>):	did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
rilliadelpilia, FA 19134-3210	Last 4 digits of account number	9306
Name and Address Northland Group Inc. P.O. Box 390846	On which entry in Part 1 or Part 2 Line 4.2 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Minneapolis, MN 55439	Last 4 digits of account number	5653
Name and Address Portfolio Recovery 120 Corporate Blvd Ste 1 Norfolk, VA 23502	On which entry in Part 1 or Part 2 Line 4.19 of (<i>Check one</i>):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
•	Last 4 digits of account number	
Name and Address Portfolio Recovery Associates LLC	On which entry in Part 1 or Part 2 Line 4.19 of (Check one):	did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims

Official Form 106 E/F

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Debtor 1 Shawn P Johnson Debtor 2 Melissa L Johnson		Case number (if know)
Attn: Bankruptcy		Part 2: Creditors with Nonpriority Unsecured Claims
Norfolk, VA 23502	Last 4 digits of account number	, av <u>I</u> . o callo a min to piony o local o callo
Name and Address Portfolio Recovery Associates LLC PO Box 12914	On which entry in Part 1 or Part 2 did Line <u>4.7</u> of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Norfolk, VA 23541	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Portfolio Recovery Associates, LLC PO Box 12914 Norfolk, VA 23541	On which entry in Part 1 or Part 2 did Line 4.6 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	8284
Name and Address RGS Collections Inc. PO Box 852039 Richardson, TX 75085-2039	On which entry in Part 1 or Part 2 did Line 4.18 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	3968
Name and Address Sanjay S. Jutla/Kevin J. Egan 55 East Jackson Blvd 16th Floor Chicago, IL 60604	On which entry in Part 1 or Part 2 did Line 4.19 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
5.115dg6, 12 66664	Last 4 digits of account number	0023
Name and Address Simm Associates, Inc. 800 Penca Der 10702	On which entry in Part 1 or Part 2 did Line 4.18 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Newark, DE 19702	Last 4 digits of account number	3403
Name and Address Stellar Recovery Inc. 1327 Highway 2W Suite 100	On which entry in Part 1 or Part 2 did Line 4.5 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Kalispell, MT 59901-3413	Last 4 digits of account number	4892
Name and Address Synchrony Bank/ JC Penneys Attn: Bankrupty BOX 965060 Orlando El 23205 5060	On which entry in Part 1 or Part 2 did Line 4.19 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Orlando, FL 32895-5060	Last 4 digits of account number	0941
Name and Address United Recovery Systems, LP PO Box 722910 Houston, TX 77272-2910	On which entry in Part 1 or Part 2 did Line 4.3 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	1798
Name and Address Van Ru Credit Corp 1350 E Touhy Ave Suite 300E Des Plaines, IL 60018-3342	On which entry in Part 1 or Part 2 did Line 4.10 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	1249
Name and Address Vital Recovery Services, LLC PO Box 923748 Peachtree Corners, GA 30010-3748	On which entry in Part 1 or Part 2 did Line 4.15 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Shawn P Johnson

Debtor 2 Melissa L Johnson		Case number (if know)	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?		
WorldMark by Wyndham, Inc.	Line 4.20 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Corporate Hea 6277 Sea Harbor Drive Orlando, FL 32821		Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?		id you list the original creditor?	
WorldMark, The Club	Line 4.20 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
9805 Willows Road Redmond, WA 98052		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Reamona, WA 96032	Last 4 digits of account number		
Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?			
Worldmark, the Club	Line 4.20 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 97976 Las Vegas, NV 89193-7976		Part 2: Creditors with Nonpriority Unsecured Claims	
Las vegas, IVV 03133-7370	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
WOW! Office - Naperville	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
1674 Frontenac Naperville, IL 60563		Part 2: Creditors with Nonpriority Unsecured Claims	
Napel ville, IL 00303	Last 4 digits of account number	2801	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?		
Wright Center for Woman's Health	Line 4.17 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
1763 Freedom Drive Suite 117		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Naperville, IL 60563			
	Last 4 digits of account number		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

0.00 0.00
0.00
0.00
0.00
Claim
0.00
0.00
0.00
68,871.21
68,871.21

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		1212111			
Fill in this infor	mation to identify your	case:			
Debtor 1	Shawn P Johnso	n			
	First Name	Middle Name	Last Name		
Debtor 2	Melissa L Johnso	on			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number				Charle if this is	
(II KIIOWII)				☐ Check if this is amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for					
2.1	Brittany Springs Apt Homes LP 2504 Bordeaux Lane Naperville, IL 60540	Debtors elect to assume terms of residential lease - 9/5/2016 - 9/10/2017					
2.2	WorldMark by Wyndham Attention: Bankruptcy Department P.O. Box 97474 Las Vegas, NV 89193	DEBTORS ELECT TO REJECT TERMS OF MAINTENANCE CONTRACT					

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		Document	Page 34 o	of 62	
Fill in this info	rmation to identify your	case:			
Debtor 1	Shawn P Johnson	1			
	First Name	Middle Name	Last Name		
Debtor 2	Melissa L Johnso				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
Official E	orm 106H				
		-1-4			
Schedul	e H: Your Code	eptors			12/15
people are filin fill it out, and n	g together, both are equa	ally responsible for supplyin boxes on the left. Attach the	g correct informat	ion. If more space is r	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
1. Do you	have any codebtors? (If y	ou are filing a joint case, do no	ot list either spouse	as a codebtor.	
■ No □ Yes					
		lived in a community proper Nevada, New Mexico, Puerto			ty states and territories include
□ No. Go t ■ Yes. Did □ N □ N	l your spouse, former spou lo	se, or legal equivalent live with	n you at the time?		
	In which community state	or territory did you live?	-NONE-	. Fill in the name a	nd current address of that person.
	Name of your spouse, former spo Number, Street, City, State & Zip				
in line 2 ag	1, list all of your codebto gain as a codebtor only if D), Schedule E/F (Official	ors. Do not include your spo that person is a guarantor o	or cosigner. Make	sure you have listed th	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	mn 1: Your codebtor Number, Street, City, State and ZII	² Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	ne.
Name				☐ Schedule E/F,	
				☐ Schedule G, lin	
Numb City	er Street	State	ZIP Code	_	
3.2				☐ Schedule D, lin	e
Name				□ Schedule E/F,	
				☐ Schedule G, lin	
Numb	er Street			_	

State

City

ZIP Code

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Fill	in this information	to identify your ca	ase:							
De	btor 1	Shawn P Jo	hnson							
1	btor 2 ouse, if filing)	Melissa L Jo	ohnson							
Un	ited States Bankrup	ptcy Court for the	: NORTHERN DISTRIC	CT OF ILL	INOIS					
Case number (If known)				-		_	ck if this is: An amende			
_								ent showing as of the follo	postpetition char owing date:	oter
	fficial Form					N	/IM / DD/ Y	YYY		
S	chedule I:	Your Inc	ome							12/15
spo	ouse. If you are se uch a separate she	parated and you	are married and not fili r spouse is not filing w On the top of any additi	ith you, d	lo not include informa	tion abou	t your spo	use. If more	e space is need	led,
1.	Fill in your emp information.	loyment		Debtor	· 1		Debtor 2	or non-filir	ig spouse	
	If you have more than		Employment status	■ Employed			☐ Employed			
attach a separate page with information about additional employers.		Employment status	☐ Not	employed		■ Not employed				
		Occupation	Insurance Sales							
	Occupation may include student		Employer's name	BIN IN	ISURANCE HOLDIN	IGS,				
			Employer's address	Suite	LaSalle Street 2500 go, IL 60602					
			How long employed t	here?	2 years		_			-
Pa	rt 2: Give De	etails About Mor	nthly Income							
	imate monthly inc use unless you are		ate you file this form. If	you have	nothing to report for an	y line, write	e \$0 in the	space. Inclu	de your non-filin	ıg
	ou or your non-filing e space, attach a s		ore than one employer, co	ombine th	e information for all em	oloyers for	that perso	n on the line	s below. If you n	need
						For De	btor 1	For Debte		
2.			ry, and commissions (b calculate what the monthl			\$6	,008.34	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

0.00

6,008.34

+\$

0.00

0.00

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

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	otor 1 otor 2	Shawn P Johnson Melissa L Johnson	_		Case	e number (<i>if known</i>)				
					For Debtor 1			or Debtor on-filing s		
	Cop	y line 4 here	4.		\$_	6,008.34	\$		0.00	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	1,531.32	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5h		\$	0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	50	c.	\$	300.42	\$		0.00	-
	5d.	Required repayments of retirement fund loans	50	d.	\$	67.06	\$		0.00	-
	5e.	Insurance		е.	\$_	316.18	\$		0.00	_
	5f.	Domestic support obligations	5f		\$_	0.00	\$		0.00	-
	5g.	Union dues	50	_	\$_	0.00	\$		0.00	_
	5h.	Other deductions. Specify:	_	h.+	· –	0.00			0.00	-
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	2,214.98	\$		0.00	=
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	3,793.36	\$		0.00	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	0,	a.	\$	128.76	\$		0.00	
	8b.	Interest and dividends	8k		\$ _	0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$_ \$	0.00	\$ \$		0.00	=
	8d.	Unemployment compensation		d.	\$	0.00	\$		0.00	_
	8e.	Social Security	86		\$	0.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$_ \$	0.00	\$ \$		0.00	-
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8(81	y. h.+	· -	0.00	٠.		0.00	_
	OII.	Other monthly income. Specify.	_ 01	II.Ŧ	Ψ_	0.00	ΤΨ.		0.00	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$_	128.76	\$		0.0	0
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$		3,922.12 + \$		0.00	= \$	3,922.12
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.							' -	0,0
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	dep				•			0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							\$	3,922.12
13.	Do :	you expect an increase or decrease within the year after you file this form	?						Combin	ned y income
		No. Yes. Explain:								

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Fill i	n this informa	tion to identify yo	our case:			Ī				
Debt	tor 1	Shawn P Joh	nson			Ch	eck if th	nis is:		
Debt	tor 2	Malianal	.					mended filing		_4
	use, if filing)	Melissa L Jo	nnson						ving postpetition chap the following date:	oter
Unite	ed States Bankr	ruptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS		MM /	DD / YYYY		
Case	e number									
(If kr	nown)									
Of	ficial Fo	rm 106J								
Sc	chedule	J: Your I	Expen	ses						12/1
info	rmation. If m		eded, atta	If two married people and the character sheet to this n.						
Part		ibe Your House	hold							
1.	Is this a joir									
	□ No. Go to	o line 2. es Debtor 2 live i	in a conar	ata hausahald?						
	= 1es. Doe		iii a sepaia	ate flousefloid?						
		-	st file Officia	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of De	ebtor 2.			
2.	Do you have	e dependents?	■ No							
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto			ependent's ge	Does dependent live with you?	
	Do not state								□ No	
	dependents	names.			-				☐ Yes ☐ No	
									☐ Yes	
									□ No	
									☐ Yes ☐ No	
									☐ Yes	
3.	expenses of	penses include f people other the	han $_{\square}$	No Yes						
	yourself and	d your depende	nts? —	100						
ехр	mate your ex		our bankru	y Expenses uptcy filing date unless y y is filed. If this is a supp						
• •		o noid for with r		mayaramant aggistanas	f van kaan					
the		h assistance and		government assistance i luded it on <i>Schedule I:</i> Y				Your expe	enses	
4.		or home owners		ses for your residence. r lot	nclude first mortgag	e 4.	\$		1,715.00	
	. ,	led in line 4:								
							•			
		estate taxes rty, homeowner's	s. or renter'	s insurance		4a. 4b.			0.00 35.00	
		•		pkeep expenses		4c.	· · ·		0.00	
_		owner's associat			and a modern to a sec	4d.			0.00	
5.	Additional r	nortgage payme	ents for yo	ur residence, such as ho	rne equity loans	5.	ъ		0.00	

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btor 1 btor 2	Shawn P Johnson Melissa L Johnson	Case num	ber (if known)	
Utilit	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	120.00
6b.	Water, sewer, garbage collection	6b.	\$	40.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	395.00
6d.	Other. Specify:	6d.	\$	0.00
	d and housekeeping supplies	7.	\$	500.00
Chile	dcare and children's education costs	8.	\$	0.00
	hing, laundry, and dry cleaning	9.	\$	140.00
Pers	onal care products and services	10.	\$	100.00
	ical and dental expenses	11.	\$	50.00
	sportation. Include gas, maintenance, bus or train fare.	10	\$	300.00
	ot include car payments.	12.	·	
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	30.00
	ritable contributions and religious donations	14.	>	0.00
Insu	rance. ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	192.10
	Health insurance	15b.	· .	366.39
	Vehicle insurance	15c.	·	105.00
	Other insurance. Specify: pet care insurance	15d.	· ·	42.95
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			72.00
Spec		16.	\$	0.00
Insta	allment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	386.15
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report a			0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I)	18.		0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spec		19.	_	
	er real property expenses not included in lines 4 or 5 of this form or on Sch. Mortgages on other property	nedule I: Yo 20a.		0.00
	Real estate taxes	20a. 20b.		0.00 0.00
		20b. 20c.	·	
	Property, homeowner's, or renter's insurance	20d. 20d.		0.00
	Maintenance, repair, and upkeep expenses		*	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
Othe	Pr: Specify:	21.	+\$	0.00
Calc	ulate your monthly expenses			
22a.	Add lines 4 through 21.		\$	4,517.59
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	4,517.59
	, , ,			.,011100
	ulate your monthly net income.		•	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		3,922.12
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	4,517.59
	Subtract your monthly expenses from your monthly income.			
22~				

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: Joint Debtor expects to find a job within the next year, thus increasing household income. Both Debtor and Joint Debtor are in need of expensive dental work, which will cause increase in dental expenses over the next year or more.

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=:0::- (b::- :						
FIII IN this i	information to identify your	case:				
Debtor 1	Shawn P Johnso	Middle Name	L aat N			
Debtor 2	Melissa L Johns		Last N	ame		
(Spouse if, filing		Middle Name	Last N	ame		
United State	es Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS			
Offica Otale	es bankruptey court for the.	TOTAL DIGITAL	1 OF ILLINOIS			
Case number	er					
(if known)					[Check if this is an amended filing
						amenaca ming
Official F	Form 106Dec					
Decla	ration About a	an Individua	I Debto	r's Sch	edules	12/15
If two marrie	ed people are filing togethe	er, both are equally response	onsible for sup	plying correct	information.	
You must fil	le this form whenever you t	ile bankruptcy schedule	s or amended	schedules. Ma	aking a false statement,	concealing property, or
	noney or property by fraud		nkruptcy case o	can result in fi	nes up to \$250,000, or in	prisonment for up to 20
years, or bo	oth. 18 U.S.C. §§ 152, 1341,	1519, and 3571.				
	Sign Below					
Did yo	ou pay or agree to pay some	eone who is NOT an atto	orney to help yo	ou fill out bank	(ruptcy forms?	
■ N	lo					
ПУ	es. Name of person				Attach Bankruntev	Petition Preparer's Notice,
<u> </u>						gnature (Official Form 119)
Under i	penalty of perjury, I declare	that I have read the sur	nmary and sch	edules filed w	ith this declaration and	
	ey are true and correct.					
X /s/	Shawn P Johnson		X /	s/ Melissa L 、	Johnson	
	nawn P Johnson			Melissa L Joh		
Sig	gnature of Debtor 1		S	Signature of Deb	otor 2	
Da	ite February 9, 2017			oate Februa	ry 9, 2017	
	. 35.44.7 0, 2011			- I Obrud	., .,	

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		nation to identify you					
De	btor 1	Shawn P Johns First Name	Middle Name		Last Name		
De	btor 2	Melissa L Johns			Last Name		
(Sp	ouse if, filing)	First Name	Middle Name		Last Name		
Un	ited States Ba	nkruptcy Court for the:	NORTHERN DISTRIC	T OF ILI	LINOIS		
	se number _						☐ Check if this is an amended filing
	fficial Fo atement		Affairs for Indiv	⁄idua	ls Filing for B	ankruptcy	4/10
info	ormation. If m	nore space is needed n). Answer every que		to this f	form. On the top of any		
			arital Status and Where \	ou Live	d Before		
1.	What is you	r current marital stati	us?				
	■ Married □ Not man						
2.	During the I	ast 3 years, have you	lived anywhere other that	an wher	e you live now?		
	□ No						
		st all of the places you	lived in the last 3 years. Do	o not incl	lude where you live now	'.	
	Debtor 1 Pr	ior Address:	Dates Debto	r 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	511 Cham #103 Naperville	berlain Lane , IL 60540	From-To: 9/2013-201 9	5	Same as Debtor 1		Same as Debtor 1 From-To:
3. stat	es and territor No Yes. Ma	<i>ie</i> s include Arizona, Ca	alifornia, Idaho, Louisiana, hedule H: Your Codebtors	Nevada,	New Mexico, Puerto Ri		ritory? (Community property and Wisconsin.)
4.	Did you hav Fill in the tota If you are filli No	e any income from en al amount of income yo	mployment or from opera ou received from all jobs ar I have income that you rec	nd all bus	sinesses, including part-	time activities.	calendar years?
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	(b	ross income efore deductions and cclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

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Debtor 1 Shawn P Johnson Debtor 2 Melissa L Johnson

Case number (if known)

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year unti the date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$6,008.34	☐ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$30.17	☐ Wages, commissions, bonuses, tips	\$0.00
	Operating a business		☐ Operating a business	
For last calendar year: January 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$73,655.33	■ Wages, commissions, bonuses, tips	\$18,601.28
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$1,517.57	☐ Wages, commissions, bonuses, tips	\$0.00
	Operating a business		☐ Operating a business	
For the calendar year before that: January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$60,776.62	■ Wages, commissions, bonuses, tips	\$57,843.63
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$4,063.95	☐ Wages, commissions, bonuses, tips	\$0.00
	Operating a business		☐ Operating a business	
 Did you receive any other incor 			limony: child support: Social S	
Include income regardless of whe and other public benefit payments winnings. If you are filing a joint cat. List each source and the gross inc. No Yes. Fill in the details.	s; pensions; rental income; inte ase and you have income that	rest; dividends; money collect you received together, list it o	ted from lawsuits; royalties; ar nly once under Debtor 1.	
Include income regardless of whe and other public benefit payments winnings. If you are filing a joint cat. List each source and the gross income.	s; pensions; rental income; inte ase and you have income that to come from each source separa Debtor 1 Sources of income	rest; dividends; money collectyou received together, list it of tely. Do not include income the dividence of	ted from lawsuits; royalties; ar nly once under Debtor 1. nat you listed in line 4. Debtor 2 Sources of income	Gross income (before deductions
Include income regardless of whe and other public benefit payments winnings. If you are filing a joint cat. List each source and the gross inc. No Yes. Fill in the details.	s; pensions; rental income; inte ase and you have income that to come from each source separate Debtor 1 Sources of income Describe below.	rest; dividends; money collectyou received together, list it of telly. Do not include income the telly. Do not include income the telly. Gross income from each source (before deductions and exclusions)	ted from lawsuits; royalties; ar nly once under Debtor 1. nat you listed in line 4. Debtor 2 Sources of income	Gross income (before deductions
Include income regardless of whe and other public benefit payments winnings. If you are filing a joint of List each source and the gross in No No Yes. Fill in the details.	pensions; rental income; interest / Dividends	rest; dividends; money collectyou received together, list it of telly. Do not include income the telly. Do not include income the telly. Bo not include income the telly. Gross income from each source (before deductions and exclusions) \$7.00	ted from lawsuits; royalties; ar nly once under Debtor 1. nat you listed in line 4. Debtor 2 Sources of income	Gross income (before deductions
Include income regardless of whe and other public benefit payments winnings. If you are filing a joint of List each source and the gross included in the prossing of the list each source and the gross included in the list each source and the gross included in the list each source and the gross included in the list each source and the gross included in the list each source and the gross included in the list each source and the gross included in the list each source and the gross included in the list each source and the gross included in the list each source and the gross included in the list each source and the gross included in the gross	pensions; rental income; interest / Dividends Taxable Refunds g; pensions; rental income; interest / Dividends	rest; dividends; money collecty ou received together, list it of tely. Do not include income the tely. Strategy and the tely. Strategy and the tely. Strategy are tely. The tely included income the tely. The tely included incl	ted from lawsuits; royalties; ar nly once under Debtor 1. nat you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)

Entered 02/13/17 11:22:46 Case 17-04039 Doc 1 Filed 02/13/17 Desc Main Page 42 of 62 Document Shawn P Johnson Debtor 1 Melissa L Johnson Debtor 2 Case number (if known) List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Total amount **Dates of payment** Amount you Was this payment for ... paid still owe Pnc Bank various \$1,200.00 \$15,395.00 ■ Mortgage Attn: Bankruptcy Car 249 5th Ave Ste 30 ☐ Credit Card Pittsburgh, PA 15222 ☐ Loan Repayment ☐ Suppliers or vendors □ Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. ☐ No Yes. List all payments to an insider. **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment still owe paid **Edna Kirby** various \$1,050.00 \$3,600.00 repaying money loaned c/o Gregory & Kacie Johnson from grandmother 1705 Lily Street Aurora, IL 60505 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency

Case number

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Document Page 43 of 62 Debtor 1 Shawn P Johnson Debtor 2 Melissa L Johnson Case number (if known) Case title Nature of the case Court or agency Status of the case Case number Portfolio Recovery Associates LLC collections Circuit Court of the Pending v. Melissa Johnson **Eighteenth Judicial** □ On appeal 2017SR000023 Circuit □ Concluded **DuPage County Judicial** Center 505 N County Farm Road Wheaton, IL 60189 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No

Yes. Fill in the details.

Describe the property you lost and how the loss occurred

Describe any insurance coverage for the loss

Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Date of your loss

Value of property lost

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Deb	otor 2 Melissa L Johnson	Ca	ase number	(if known)				
Dor	List Contain Downsonts on Transfers							
Par 16.	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepar Include any attorneys, bankruptcy petition prepare	ing a bankruptcy petition?			rty to anyone you			
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment			
	Lorraine M. Greenberg 150 North Michigan Avenue Suite 800 Chicago, IL 60601 Igreenberg@greenberglaw.net Kacie Johnson	\$335 for court costs; \$1,500.00 attorneys fees	for	2/7/2017	\$1,835.00			
	Debtor CC, Inc. 378 Summit Ave. Jersey City, NJ 07306 www.debtorcc.org	mandatory prefiling credit coun course	seling	2/7/2017	\$14.95			
17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors. Do not include any payment or transfer that you list. No Yes. Fill in the details.	or to make payments to your creditors	oehalf pay c ?	or transfer any prope	rty to anyone who			
	Person Who Was Paid Address	Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment			
	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and value of property transferred	Describe a payments paid in ex	any property or received or debts change	Date transfer was made			
	Person's relationship to you		•	J				
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No □ Yes. Fill in the details.		lf-settled tru	ust or similar device	of which you are a			
	Name of trust	Description and value of the proper	ty transferr	ed	Date Transfer was made			

Debtor 1

Shawn P Johnson

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Debte				Case number (if known)	
Part	8: List of Certain Financial Accounts, Ir	struments, Safe Depo	sit Boxes, and S	torage Units	
20. V s lı	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso ☐ No ☐ Yes. Fill in the details.	cy, were any financial acco	accounts or instruction	ruments held in your name, or s	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	Date account was closed, sold, moved, or transferred	Last balance before closing o transfel
	Prudential (401k) Scranton, PA	xxxx-5703	☐ Checking ☐ Savings ☐ Money Ma ☐ Brokerage	July, 2016	\$14,000.00
			Other 40°	1(k)	
I	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had a	ccess to it?	Describe the contents	Do you still have it?
22. F	Have you stored property in a storage unit	State and ZIP Code)		I year before you filed for bank	
Ī	☐ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has o to it? Address (Number State and ZIP Code)		Describe the contents	Do you still have it?
Part	9: Identify Property You Hold or Contro	I for Someone Else			
_	Do you hold or control any property that so for someone. No Yes. Fill in the details.	omeone else owns? In	clude any prope	rty you borrowed from, are sto	ring for, or hold in trust
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City Code)		Describe the property	Value
Part	10: Give Details About Environmental In	formation			
or th	he purpose of Part 10, the following definit	ions apply:			
■ <i>E</i>	Environmental law means any federal, stat toxic substances, wastes, or material into	e, or local statute or re the air, land, soil, surfa	ice water, groun		

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Shawn P Johnson
Debtor 2 Melissa L Johnson

Case number (if known)

24.	Has any governmental unit notified you that	you may be liable or potentially liable u	ınder or in violation of an environme	ntal law?					
	■ No □ Yes. Fill in the details.								
	Name of site	Governmental unit	Environmental law, if you	Date of notice					
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	know it	Date of Hotice					
25.	Have you notified any governmental unit of a	any release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and									
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	11: Give Details About Your Business or C	Connections to Any Business							
27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have any	of the following connections to any	business?					
	A sole proprietor or self-employed in	n a trade, profession, or other activity, e	ither full-time or part-time						
	☐ A member of a limited liability compa	any (LLC) or limited liability partnership	(LLP)						
	☐ A partner in a partnership								
	☐ An officer, director, or managing exe	ecutive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	■ No. None of the above applies. Go to P	art 12.							
	Yes. Check all that apply above and fill	in the details below for each business.							
	Business Name	Describe the nature of the business	Employer Identification number						
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security n	umber or IIIN.					
	Independent Sales of Legal Shield	sales of legal shield policies for	Dates business existed EIN: xxxxx9761						
	807 Beaumont Drive, Apt. 104	prepaid or discounted legal							
	Naperville, IL 60540	services	From-To 9/2013 - present						
	Within 2 years before you filed for bankruptoinstitutions, creditors, or other parties.	cy, did you give a financial statement to	anyone about your business? Inclu	de all financial					
	■ No								
	Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)								
	Comments of the state of the st								

Entered 02/13/17 11:22:46 Case 17-04039 Doc 1 Filed 02/13/17 Desc Main Document Page 47 of 62 Shawn P Johnson Debtor 1 Melissa L Johnson Debtor 2 Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Shawn P Johnson /s/ Melissa L Johnson Shawn P Johnson Melissa L Johnson Signature of Debtor 1 Signature of Debtor 2 Date February 9, 2017 February 9, 2017

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No □ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person ... Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	Shawn P John	son		
	First Name	Middle Name	Last Name	
Debtor 2	Melissa L Johr	nson		
(Spouse if, filing)	First Name	Middle Name	Last Name	
(if known)				Check if this is an amended filing
(II KIOWI)				amended illing
. ,	orm 108			amended liling
Official Fo			ıals Filing Under	amended illing

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C	
☐ Surrender the property. ☐ Retain the property and redeem it.	□ No	
■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes	
■ Surrender the property.	■ No	
 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes	
	Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: ☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement.	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

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Debtor 1 Snawn P Johnson Debtor 2 Melissa L Johnson					Case number (if known)			
Der)(UI Z	WIEIISSA L	Johnson					
Les	sor's na	ame:	Brittany Springs Apt Home	es LP		□ No		
						Yes		
	scriptior perty:	n of leased	Debtors elect to assume to	erms of residential leas	e - 9/5/2016 - 9/10/2017			
Les	sor's na	ame:	WorldMark by Wyndham			■ No		
						☐ Yes		
	scriptior perty:	n of leased	DEBTORS ELECT TO REJ	ECT TERMS OF MAINT	ENANCE CONTRACT			
Par	t 3:	Sign Below						
			ry, I declare that I have indicate at to an unexpired lease.	ed my intention about any	property of my estate that se	cures a debt and any personal		
Χ	/s/ SI	hawn P Jo	hnson	χ /s/ I	Melissa L Johnson			
	Shav	vn P Johns	son	Mel	issa L Johnson			
	Signa	ture of Debte	or 1	Sign	ature of Debtor 2			
	Date	Februa	ary 9, 2017	Date	February 9, 2017			

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-04039 Doc 1 Filed 02/13/17 Entered 02/13/17 11:22:46 Desc Main Document Page 54 of 62

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	Shawn P Johnson Melissa L Johnson		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMP	ENSATION OF ATTOR	NEY FOR DE	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplatio	iling of the petition in bankruptcy, o	or agreed to be paid	to me, for services	
	For legal services, I have agreed to accept		\$	1,500.00	
	Prior to the filing of this statement I have receive			1,500.00	
	Balance Due			0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed con	mpensation with any other person u	nless they are mem	bers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the i				y law firm. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects	of the bankruptcy of	ease, including:	
	 a. Analysis of the debtor's financial situation, and rer b. Preparation and filing of any petition, schedules, s c. Representation of the debtor at the meeting of cred d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicate 	tatement of affairs and plan which a litors and confirmation hearing, and preduce to market value; exer	may be required; I any adjourned hea	rings thereof;	
6.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any of any other adversary proceeding; prepof liens on household goods.	dischargeability actions, judic	ial lien avoidanc		
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of bankruptcy proceeding.	any agreement or arrangement for p	payment to me for r	epresentation of the	e debtor(s) in
	February 9, 2017	/s/ Lorraine M. Gre	enberg		
_	Date	Lorraine M. Green	berg		
		Signature of Attorney Lorraine M. Green			
		150 N. Michigan A			
		Suite 800			
		Chicago, IL 60601 312-588-3330 Fax	· 312-264-5620		
		lgreenberg@greer			
		Name of law firm			

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The undersigned hereby retains as my Attorney, LORRAINE M. GREENBERG and such other attorneys as may be employed by her and I hereby give permission to Lorraine M. Greenberg to hire other attorneys as co-counsel and to represent me, and to use administrative assistants of her choosing in the following legal matter:

PLUS An additional \$10 - 50 approximately for each credit counseling session (two are required) (I pay this directly to an approved credit counseling agency. Ms. Greenberg will provide me with information regarding agency)

PLUS An additional \$225.00 for each Trustee hearing that I fail to attend.

PLUS An additional fee billed at \$300.00 per hour for the defense of an adversary proceeding (\$3,000.00 minimum retainer)

PLUS An additional \$ 100.00 fee + \$30.00 court costs to add creditors after case is filed.

PLUS An additional \$ 450.00 fees to prepare and present either a Motion for Redemption, a Motion to Avoid Lien or Motion to Reopen Case (plus court costs to reopen the case of \$260.00), all of which must be paid in full before Attorney Greenberg will prepare and present any of these Motions.

By signing below I authorize Ms. Greenberg to deposit all funds received for attorneys fees to be deposited into her operations account immediately and to use the funds immediately as her own funds, as an advance payment retainer. I also authorize her to deposit all funds into her Client funds account and immediately transfer the lump sum attorneys fees agreed to above to her operations account. I understand that all money paid for work performed and earned is NON-REFUNDABLE. In every case, the initial retainer of \$500.00 is non-refundable. This is a minimum charge. It covers our fees and costs for opening a file on your behalf and inputting your information into our computer system. If Client chooses not to proceed with the Chapter 7 for any reason, any fees earned for work performed or for costs expended before the case has been filed are non-refundable. I understand that attorney services may be billed at the rate of \$275.00 per hour and paralegal services up to \$100.00 per hour.

I have been told that both a chapter 7 and Chapter 13 are proceedings under the U.S. Bankruptcy Code, and that they both affect my credit rating. My attorney has advised me that the decision to file either type of bankruptcy must be carefully considered, and that the decision is mine alone. My attorney has explained both Chapter 13 and Chapter 7 to me and by signing below I acknowledge having been given a copy of each of the Disclosure Forms and the Bankruptcy Information Sheet.

I understand that all of the fees and costs must be paid in full before my case will be fully prepared and filed with the Court, unless otherwise agreed to by Lorraine M. Greenberg. I understand that I will not have the Court's protection from my creditors until the fees and costs have been paid in full, unless otherwise agreed to in writing by Lorraine M. Greenberg and myself.

I have not been made any promises or guarantees other than that my attorneys will represent me in strict compliance with the law, and to the best of their ability and knowledge. I promise to tell my attorneys and the Court the full truth and to cooperate fully with my attorneys in this legal matter, and that if I do not, I agree that my attorney may discontinue representing me.

By signing below, I authorize my attorneys and their staff to file all necessary documents and schedules electronically with the Court and to fax or mail or email copies of pages from my Bankruptcy Petition and Schedules as well as the Notice of Bankruptcy Filing to my Employer, or any other entities my attorneys deem necessary. I also authorize my attorneys to contact whomever is necessary to obtain documentation to support my testimony as to my assets, liabilities, and income, including my present or past employer and the Internal Revenue Service. I further authorize my attorney to use email as a means of communication between myself and/or my creditors and employer.

I understand that it is my responsibility alone to obtain a Certificate of Completion from a credit counseling agency approved by the U.S. Trustee and to have it faxed to my attorneys at (312)264-5620 or delivered in person or emailed to my attorney at lgreenberg@greenberglaw.net and that my attorneys cannot file my case until a certificate is received. I have also been told that I must complete a second credit management training program after my case is filed in order to obtain a discharge of my debts.

By signing below, I acknowledge that I have been informed of any potential conflict of interest that my attorneys may have and that I waive any such conflict without further notice. I agree to pay all reasonable and necessary attorneys fees and costs incurred by Ms. Greenberg in the collection of any amounts due under this contract.

I have read this agreement and fully understand it and herewith acknowledge receipt of a copy. I acknowledge that this agreement is the only/agreement relating to attorneys fees that I have signed.

Debtor

Agreed To:

Lorraine M Greenberg

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United States Bankruptcy Court Northern District of Illinois

In re	Shawn P Johnson Melissa L Johnson		Case No.	
	mensaa E oomison	Debtor(s)	Chapter 7	
	V	ERIFICATION OF CREDITOR M	MATRIX	
		Number of	f Creditors:	58
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of credi	tors is true and correct to	o the best of my
Date:	February 9, 2017	/s/ Shawn P Johnson Shawn P Johnson		
		Signature of Debtor		

Advanced Call Center Technologies PO Box 9091 Gray, TN 37615-9091

Alliance One 4850 Street Rd Ste 300 Trevose, PA 19053

Alltran Financial, LP PO Box 722910 Houston, TX 77272-2910

Bill Me Later PO Box 2394 Omaha, NE 68103-2394

Blitt & Gaines, P.C 661 Glenn Avenue Wheeling, IL 60090

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One 15000 Capital One Dr Richmond, VA 23238

Cardmember Service PO Box 108 Saint Louis, MO 63166-0108

Citicards Cbna Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179

Citicards Cbna Po Box 6241 Sioux Falls, SD 57117

Client Services, Inc 3451 Harry S. Truman Blvd. Saint Charles, MO 63301-4047 ComCast Cable PO Box 3002 Southeastern, PA 19398

Comenity Bank, Bankruptcy Dept PO Box 182125 Columbus, OH 43218-2125

Comenity Bank, Bankruptcy Dept PO Box 183043 Columbus, OH 43218-3043

Commerce Bank
Attn: KC Rec -10
Po Box 419248
Kansas City, MO 64141

Commerce Bank 1045 Executive Parkway D Saint Louis, MO 63141

Credit Management, LP Credit Management, LP Po Box 118288 Carrolton, TX 75011

Credit Management, LP 4200 International Pkwy Carrollton, TX 75007

Discover Financial Po Box 3025 New Albany, OH 43054

Discover Financial Po Box 15316 Wilmington, DE 19850

Edward Hospital 801 S. Washington Street Attn: Patient Financial Accounts Naperville, IL 60540 Edward-Elmhurst Health Edward Hospital PO Box 4207 Carol Stream, IL 60197-4207

Elan Financial Service dba Edward Jones Mastercard Po Box 790084 Saint Louis, MO 63179

FMA Alliance, Ltd. 12339 Cutten Road Houston, TX 77066

GC Services Limited Partnership Collection Agency Division 6330 Gulfton Houston, TX 77081

Glass Mountain Capital LLC 1930 Thoreau Drive, Ste 100 Schaumburg, IL 60173

Lending Club Corp 71 Stevenson St Suite 300 San Francisco, CA 94105

Lending Club Corp 71 Stevenson St Ste 300 San Francisco, CA 94105

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Merchants Credit 223 W Jackson Blvd Ste 4 Chicago, IL 60606

Monarch Recovery Management 10965 Decatur Road Philadelphia, PA 19154-3210 Northland Group Inc. P.O. Box 390846 Minneapolis, MN 55439

Paypal Credit PO Box 105658 Atlanta, GA 30348-5658

Pinnacle Recovery Inc. PO Box 130848 Carlsbad, CA 92013

Pnc Bank Attn: Bankruptcy 249 5th Ave Ste 30 Pittsburgh, PA 15222

Pnc Bank 2730 Liberty Ave Pittsburgh, PA 15222

Portfolio Recovery Po Box 41067 Norfolk, VA 23541

Portfolio Recovery 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Portfolio Recovery Associates LLC 120 Corporate Blvd Attn: Bankruptcy Norfolk, VA 23502

Portfolio Recovery Associates LLC PO Box 12914 Norfolk, VA 23541

Portfolio Recovery Associates, LLC PO Box 12914 Norfolk, VA 23541

RGS Collections Inc. PO Box 852039 Richardson, TX 75085-2039

Sanjay S. Jutla/Kevin J. Egan 55 East Jackson Blvd 16th Floor Chicago, IL 60604

Simm Associates, Inc. 800 Pencader Drive Newark, DE 19702

Stellar Recovery Inc. 1327 Highway 2W Suite 100 Kalispell, MT 59901-3413

Synchrony Bank/ JC Penneys Attn: Bankrupty PO BOX 965060 Orlando, FL 32895-5060

United Recovery Systems, LP PO Box 722910 Houston, TX 77272-2910

Van Ru Credit Corp 1350 E Touhy Ave Suite 300E Des Plaines, IL 60018-3342

Vital Recovery Services, LLC PO Box 923748 Peachtree Corners, GA 30010-3748

Worldmark by Wyndham 10750 W Charleston Blvd Las Vegas, NV 89135

WorldMark by Wyndham Attention: Bankruptcy Department P.O. Box 97474 Las Vegas, NV 89193

WorldMark by Wyndham, Inc. Corporate Hea 6277 Sea Harbor Drive Orlando, FL 32821

WorldMark, The Club 9805 Willows Road Redmond, WA 98052

Worldmark, the Club PO Box 97976 Las Vegas, NV 89193-7976

WOW! Office - Naperville 1674 Frontenac Naperville, IL 60563

Wright Center for Woman's Health 1763 Freedom Drive Suite 117 Naperville, IL 60563

Wyndham Resort Development Corp PO Box 93843 Las Vegas, NV 89193-3843

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